

Sub-Assurance	KDADS OPERATIONAL PLAN - HCBS Techonology Assisted (TA) Waiver Quality Review										
	PERFORMANCE MEASURE	How sample data is derived	Item 1: description of how and when the protocols and system were implemented	Item 2: specific timelines/deadlines given to the MCOs for data collection and submission	Item 3: designated MCO staff who will collect the data	Item 4: designated MCO staff who will submit the data	Item 5: designated state staff who will review the submitted data	Item 6: specific timelines/deadlines for the state to conduct data review	Item 7: designated state staff who will conduct remediation based on the reviewed data	(Item 8): number of quarterly quality reviews that will be conducted, analyzed, and remediated prior to the TA waiver renewal	(Item 9): engage CMS staff in technical assistance discussions regarding adequate responses for analyzing data and remediation measures
A-4 The Medicaid agency retains ultimate administrative authority and responsibility for the operation of the waiver program by exercising oversight of the performance of waiver functions by other state and local/regional non-state agencies (if appropriate) and contracted entities.	Number and percent of Quality Review reports generated by KDADS, the Operating Agency, that were submitted to the State Medicaid Agency.	These measures are all 100 percent review and are not based on sampling.	KDADS and KDHE work jointly to track and process administrative authority data depending on the specific measure.	MCOs have no responsibility with the Administrative Authority measures.	MCOs have no responsibility with the Administrative Authority measures.	MCOs have no responsibility with the Administrative Authority measures.	KDHE will review the data.	KDHE will review the data.	KDHE will work with KDADS regarding remediation efforts.	8 quarters starting 7/1/16 and ending 6/30/18	KDADS and KDHE will continue dialogue with CMS regarding HCBS QA processes and issues.
B-4 The state must demonstrate that it implements the processes and instrument(s) specified in its approved waiver for evaluating/revaluating an applicant's/waiver participant's level of care consistent with care provided in a hospital, nursing facility, or intermediate care facility for persons with intellectual disabilities.	An evaluation for level of care is provided to all applicants for whom there is reasonable indication that services may be needed in the future.	A representative sample of HCBS Waiver individual's case files will be selected quarterly by KDADS' Financial and Information Services Commission (FISC), and assigned to the appropriate Quality Management Specialist (QMS) for review. The selected cases will include both Primary (P) and Secondary (S) listing of cases. Record cases open for 30 days or less, from MMIS eligibility date, are considered a "non-review" and will not be reviewed by QMS. A secondary case will be substituted when the case is deemed a "non-review."	HCBS Quality Review policy was approved by KDHE (see Appendix E). It was reviewed initially in March 2016 with feedback provided by KDHE in April 2016. The policy is currently in final stages of review and formal approval. (See Appendix A - TA Waiver Quality Review Project Redesign). Following the creation of these policy and procedures the Quality Review Tracking (QRT) was enhanced to align with the new procedures ensuring that all data is collected and tracked consistently for purposes of quality management.	The collection and processing of level of care data is performed by a KDADS contractor and not the MCO. The level of care is determined via the MATLOC tool as per the approved TA Waiver. Functional Assessors complete the level of care assessment and enter directly into the MATLOC system. The LOC assessment is reviewed during the Quality Reviews process. 2015 and the first half of 2016; review completed by KDADS by 12/1/16.	The collection and processing of level of care data is performed by a KDADS contractor and not the MCO. The level of care is determined via the MATLOC tool as per the approved TA Waiver.	The collection and processing of level of care data is performed by a KDADS contractor and not the MCO. The level of care is determined via the MATLOC tool as per the approved TA Waiver.	KDADS Survey, Certification, and Credentialing HCBS Quality Management Specialists lead by Codi Thurness, Commissioner and Janelle Lyons, Manager: Paula Ellis; Melissa Cowley; April Unruh; Nick Karam; Patte Spencer; Diane Beggs; Rick Housman; Elizabeth Allen; Neal Schmidtberger; Paula George; Rita Logan.	Functional Assessors complete the level of care assessment and enter directly into the MATLOC system. The LOC assessment is reviewed during the Quarterly Quality Review process. For details on the process, please reference APPENDIX E: HCBS Quality Review Policy	KDADS SCC will provide remediation as needed for any systemic issues related to the Quality Review process. KDADS CSP will provide remediation as needed for any programming issues related to the specific waiver. Pleaser refer to section titled <i>Remediation and Response Process</i> in the attached draft HCBS Quality Review Policy (Appendix E, p. 2).	8 quarters starting 7/1/16 and ending 6/30/18	KDADS and KDHE will continue dialogue with CMS regarding HCBS QA processes and issues.
B-4ii The level of care of enrolled individuals is reevaluated at least annually or as specified in the approved waiver.	Number and percent of waiver participants who receive their annual Level of Care evaluation within 12 months of the previous Level of Care determination.	A representative sample of HCBS Waiver individual's case files will be selected quarterly by KDADS' Financial and Information Services Commission (FISC), and assigned to the appropriate Quality Management Specialist (QMS) for review. The selected cases will include both Primary (P) and Secondary (S) listing of cases. Record cases open for 30 days or less, from MMIS eligibility date, are considered a "non-review" and will not be reviewed by QMS. A secondary case will be substituted when the case is deemed a "non-review."	HCBS Quality Review policy was approved by KDHE (see Appendix E). It was reviewed initially in March 2016 with feedback provided by KDHE in April 2016. The policy is currently in final stages of review and formal approval. (See Appendix A - TA Waiver Quality Review Project Redesign). Following the creation of these policy and procedures the Quality Review Tracking (QRT) was enhanced to align with the new procedures ensuring that all data is collected and tracked consistently for purposes of quality management. BRAD: NEED NARRATIVE ABOUT THE NEW QRT SYSTEM DESIGN AND IMPLEMENTATION WITH SCREEN SHOTS - ON ALL QRT MENTIONS	The collection and processing of level of care data is performed by a KDADS contractor and not the MCO. The level of care is determined via the MATLOC tool as per the approved TA Waiver. Functional Assessors complete the level of care assessment and enter directly into the MATLOC system. The LOC assessment is reviewed during the Quality Reviews process. 2015 and the first half of 2016; review completed by KDADS by 12/1/16.	The collection and processing of level of care data is performed by a KDADS contractor and not the MCO. The level of care is determined via the MATLOC tool as per the approved TA Waiver.	The collection and processing of level of care data is performed by a KDADS contractor and not the MCO. The level of care is determined via the MATLOC tool as per the approved TA Waiver.	KDADS Survey, Certification, and Credentialing HCBS Quality Management Specialists lead by Codi Thurness, Commissioner and Janelle Lyons, Manager: Paula Ellis; Melissa Cowley; April Unruh; Nick Karam; Patte Spencer; Diane Beggs; Rick Housman; Elizabeth Allen; Neal Schmidtberger; Paula George; Rita Logan.	Functional Assessors complete the level of care assessment and enter directly into the MATLOC system. The LOC assessment is reviewed during the Quarterly Quality Review process. For details on the process, please reference APPENDIX E: HCBS Quality Review Policy	KDADS SCC will provide remediation as needed for any systemic issues related to the Quality Review process. KDADS CSP will provide remediation as needed for any programming issues related to the specific waiver. Pleaser refer to section titled <i>Remediation and Response Process</i> in the attached draft HCBS Quality Review Policy (Appendix E, p. 2).	8 quarters starting 7/1/16 and ending 6/30/18	KDADS and KDHE will continue dialogue with CMS regarding HCBS QA processes and issues.
B-4iii. The process and instruments described in the approved waiver are applied appropriately and according to the approved description to determine initial participant level of care.	Number and percent of waiver participants whose Level of Care (LOC) determinations used the State's approved screening tool.	A representative sample of HCBS Waiver individual's case files will be selected quarterly by KDADS' Financial and Information Services Commission (FISC), and assigned to the appropriate Quality Management Specialist (QMS) for review. The selected cases will include both Primary (P) and Secondary (S) listing of cases. Record cases open for 30 days or less, from MMIS eligibility date, are considered a "non-review" and will not be reviewed by QMS. A secondary case will be substituted when the case is deemed a "non-review."	HCBS Quality Review policy was approved by KDHE (see Appendix E). It was reviewed initially in March 2016 with feedback provided by KDHE in April 2016. The policy is currently in final stages of review and formal approval. (See Appendix A - TA Waiver Quality Review Project Redesign). Following the creation of these policy and procedures the Quality Review Tracking (QRT) was enhanced to align with the new procedures ensuring that all data is collected and tracked consistently for purposes of quality management.	The collection and processing of level of care data is performed by a KDADS contractor and not the MCO. The level of care is determined via the MATLOC tool as per the approved TA Waiver. Functional Assessors complete the level of care assessment and enter directly into the MATLOC system. The LOC assessment is reviewed during the Quality Reviews process. 2015 and the first half of 2016; review completed by KDADS by 12/1/16.	The collection and processing of level of care data is performed by a KDADS contractor and not the MCO. The level of care is determined via the MATLOC tool as per the approved TA Waiver.	The collection and processing of level of care data is performed by a KDADS contractor and not the MCO. The level of care is determined via the MATLOC tool as per the approved TA Waiver.	KDADS Survey, Certification, and Credentialing HCBS Quality Management Specialists lead by Codi Thurness, Commissioner and Janelle Lyons, Manager: Paula Ellis; Melissa Cowley; April Unruh; Nick Karam; Patte Spencer; Diane Beggs; Rick Housman; Elizabeth Allen; Neal Schmidtberger; Paula George; Rita Logan.	Functional Assessors complete the level of care assessment and enter directly into the MATLOC system. The LOC assessment is reviewed during the Quarterly Quality Review process. For details on the process, please reference APPENDIX E: HCBS Quality Review Policy	KDADS SCC will provide remediation as needed for any systemic issues related to the Quality Review process. KDADS CSP will provide remediation as needed for any programming issues related to the specific waiver. Pleaser refer to section titled <i>Remediation and Response Process</i> in the attached draft HCBS Quality Review Policy (Appendix E, p. 2).	8 quarters starting 7/1/16 and ending 6/30/18	KDADS and KDHE will continue dialogue with CMS regarding HCBS QA processes and issues.
C-4i: The state verifies that providers initially and continually meet required licensure and/or certification standards and adhere to other state standards prior to their furnishing waiver services.	Number/percent of new licensed/certified waiver provider applicants that initially met licensure requirements, certification requirements, and other waiver standards prior to furnishing waiver services.	A representative sample of HCBS Waiver individual's case files will be selected quarterly by KDADS' Financial and Information Services Commission (FISC), and assigned to the appropriate Quality Management Specialist (QMS) for review. The selected cases will include both Primary (P) and Secondary (S) listing of cases. Record cases open for 30 days or less, from MMIS eligibility date, are considered a "non-review" and will not be reviewed by QMS. A secondary case will be substituted when the case is deemed a "non-review."	HCBS Quality Review policy was reviewed and approved by KDHE. (See Appendix E). It was reviewed initially in March 2016 with feedback provided by KDHE in April 2016. The policy is currently in final stages of review and formal approval. (See Appendix A - TA Waiver Quality Review Project Redesign). Following the creation of these policy and procedures the Quality Review Tracking (QRT) was enhanced to align with the new procedures ensuring that all data is collected and tracked consistently for purposes of quality management.	Timeline provided to MCOs for Quality Reviews: A. 2015 Quality Reviews: Not Applicable per CMS guidance. B. 2016 Quality Review of Provider Qualifications i. Sample Posted by KDADS: 11/29/16 ii. Information gathered by MCO: 1/10/17 iii. Review complete by KDADS (onsite): 1/11/17-2/3/17 (data entry to follow)	Communication related to any HCBS Waiver Quality Review is sent via email to one point of contact within each MCO. This point of contact will communicate and coordinate with the applicable MCO HCBS Waiver manager. Each MCO has staff approved to utilize the QRT to provide documentation. There are 201 staff across the MCOs with this access. (Amerigroup - 131; Sunflower - 14; United - 56)	Communication related to any HCBS Waiver Quality Review is sent via email to one point of contact within each MCO. This point of contact will communicate and coordinate with the applicable MCO HCBS Waiver manager.	KDADS Survey, Certification, and Credentialing HCBS Quality Management Specialists lead by Codi Thurness, Commissioner and Janelle Lyons, Manager: Paula Ellis; Melissa Cowley; April Unruh; Nick Karam; Patte Spencer; Diane Beggs; Rick Housman; Elizabeth Allen; Neal Schmidtberger; Paula George; Rita Logan.	Quarterly sample for quality review will be pulled by the 15th day of the month following the end of the quarter. MCOs will have 60 days to upload documents to the KDADS Quarterly Review Tracking System. State quality review staff will have 90 days to complete their review and post findings in the Quality Review Tracking System.	KDADS SCC will provide remediation as needed for any systemic issues related to the Quality Review process. KDADS CSP will provide remediation as needed for any programming issues related to the specific waiver. Pleaser refer to section titled <i>Remediation and Response Process</i> in the attached draft HCBS Quality Review Policy (Appendix E, p. 2).	8 quarters starting 7/1/16 and ending 6/30/18	KDADS and KDHE will continue dialogue with CMS regarding HCBS QA processes and issues.

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C-I: The state monitors non-licensed/non-certified providers to assure adherence to waiver requirements.	The state monitors non-licensed/non-certified providers to assure adherence to waiver requirements.	A representative sample of HCBS Waiver individual's case files will be selected quarterly by KDADS' Financial and Information Services Commission (FISC), and assigned to the appropriate Quality Management Specialist (QMS) for review. The selected cases will include both Primary (P) and Secondary (S) listing of cases. Record cases open for 30 days or less, from MMIS eligibility date, are considered a "non-review" and will not be reviewed by QMS. A secondary case will be substituted when the case is deemed a "non-review."	HCBS Quality Review policy was reviewed and approved by KDHE with input from the MCOs (see Appendix E). It was reviewed initially in March 2016 with feedback provided by KDHE in April 2016. The policy is currently in final stages of review and formal approval. See Appendix A - TA Waiver Quality Review Project Redesign). Following the creation of these policy and procedures the Quality Review Tracking (QRT) was enhanced to align with the new procedures ensuring that all data is collected and tracked consistently for purposes of quality management.	Timeline provided to MCOs for Quality Reviews: A. 2015 Quality Reviews: Not Applicable per CMS guidance. B. 2016 Quality Review of Provider Qualifications i. Sample Posted by KDADS: 11/29/16 ii. Information gathered by MCO: 1/10/17 iii. Review complete by KDADS (onsite): 1/11/17-2/3/17 (data entry to follow)	Communication related to any HCBS Waiver Quality Review is sent via email to one point of contact within each MCO. This point of contact will communicate and coordinate with the applicable MCO HCBS Waiver manager. Each MCO has staff approved to utilize the QRT to provide documentation. There are 201 staff across the MCOs with this access. (Amerigroup - 131; Sunflower - 14; United - 56)	Communication related to any HCBS Waiver Quality Review is sent via email to one point of contact within each MCO. This point of contact will communicate and coordinate with the applicable MCO HCBS Waiver manager.	KDADS Survey, Certification, and Credentialing HCBS Quality Management Specialists lead by Codi Thurness, Commissioner and Janelle Lyons, Manager: Paula Ellis; Melissa Cowley; April Unruh; Nick Karam; Patte Spencer; Diane Beggs; Rick Housman; Elizabeth Allen; Neal Schmidtberger; Paula George; Rita Logan.	Quarterly sample for quality review will be pulled by the 15th day of the month following the end of the quarter. MCOs will have 60 days to upload documents to the KDADS Quarterly Review Tracking System. State quality review staff will have 90 days to complete their review and post findings in the Quality Review Tracking System.	KDADS SCC will provide remediation as needed for any systemic issues related to the Quality Review process. KDADS CSP will provide remediation as needed for any programing issues related to the specific waiver. Pleaser refer to section titled <i>Remediation and Response Process</i> in the attached draft HCBS Quality Review Policy (Appendix E, p. 2).	8 quarters starting 7/1/16 and ending 6/30/18	KDADS and KDHE will continue dialogue with CMS regarding HCBS QA processes and issues.
C-III: The state implements its policies and procedures for verifying that provider training is conducted in accordance with state requirements and the approved waiver.	Number and percent of active providers that meet training requirements.	A representative sample of HCBS Waiver individual's case files will be selected quarterly by KDADS' Financial and Information Services Commission (FISC), and assigned to the appropriate Quality Management Specialist (QMS) for review. The selected cases will include both Primary (P) and Secondary (S) listing of cases. Record cases open for 30 days or less, from MMIS eligibility date, are considered a "non-review" and will not be reviewed by QMS. A secondary case will be substituted when the case is deemed a "non-review."	HCBS Quality Review policy was reviewed and approved by KDHE with input from the MCOs (see Appendix E). It was reviewed initially in March 2016 with feedback provided by KDHE in April 2016. The policy is currently in final stages of review and formal approval. See Appendix A - TA Waiver Quality Review Project Redesign). Following the creation of these policy and procedures the Quality Review Tracking (QRT) was enhanced to align with the new procedures ensuring that all data is collected and tracked consistently for purposes of quality management.	Timeline provided to MCOs for Quality Reviews: A. 2015 Quality Reviews: Not Applicable per CMS guidance. B. 2016 Quality Review of Provider Qualifications i. Sample Posted by KDADS: 11/29/16 ii. Information gathered by MCO: 1/10/17 iii. Review complete by KDADS (onsite): 1/11/17-2/3/17 (data entry to follow)	Communication related to any HCBS Waiver Quality Review is sent via email to one point of contact within each MCO. This point of contact will communicate and coordinate with the applicable MCO HCBS Waiver manager. Each MCO has staff approved to utilize the QRT to provide documentation. There are 201 staff across the MCOs with this access. (Amerigroup - 131; Sunflower - 14; United - 56)	Communication related to any HCBS Waiver Quality Review is sent via email to one point of contact within each MCO. This point of contact will communicate and coordinate with the applicable MCO HCBS Waiver manager.	KDADS Survey, Certification, and Credentialing HCBS Quality Management Specialists lead by Codi Thurness, Commissioner and Janelle Lyons, Manager: Paula Ellis; Melissa Cowley; April Unruh; Nick Karam; Patte Spencer; Diane Beggs; Rick Housman; Elizabeth Allen; Neal Schmidtberger; Paula George; Rita Logan.	Quarterly sample for quality review will be pulled by the 15th day of the month following the end of the quarter. MCOs will have 60 days to upload documents to the KDADS Quarterly Review Tracking System. State quality review staff will have 90 days to complete their review and post findings in the Quality Review Tracking System.	KDADS SCC will provide remediation as needed for any systemic issues related to the Quality Review process. KDADS CSP will provide remediation as needed for any programing issues related to the specific waiver. Pleaser refer to section titled <i>Remediation and Response Process</i> in the attached draft HCBS Quality Review Policy (Appendix E, p. 2).	8 quarters starting 7/1/16 and ending 6/30/18	KDADS and KDHE will continue dialogue with CMS regarding HCBS QA processes and issues.
D-I: Service plans address all individuals' assessed needs (including health and safety risk factors) and personal goals, either by the provision of waiver services or through other means.	Number and percent of waiver participants whose service plans address their assessed needs and capabilities as indicated in the assessment.	A representative sample of HCBS Waiver individual's case files will be selected quarterly by KDADS' Financial and Information Services Commission (FISC), and assigned to the appropriate Quality Management Specialist (QMS) for review. The selected cases will include both Primary (P) and Secondary (S) listing of cases. Record cases open for 30 days or less, from MMIS eligibility date, are considered a "non-review" and will not be reviewed by QMS. A secondary case will be substituted when the case is deemed a "non-review."	HCBS Quality Review policy was reviewed and approved by KDHE with input from the MCOs (see Appendix E). It was reviewed initially in March 2016 with feedback provided by KDHE in April 2016. The policy is currently in final stages of review and formal approval. See Appendix A - TA Waiver Quality Review Project Redesign). Following the creation of these policy and procedures the Quality Review Tracking (QRT) was enhanced to align with the new procedures ensuring that all data is collected and tracked consistently for purposes of quality management.	Timeline provided to MCOs for Quality Reviews: A. 2015 Quality Reviews: i. Sample Posted by KDADS: 5/19/16 ii. Upload completed by MCO: 8/1/16 iii. Review completed by KDADS: 12/1/16 2016 First Half Quality Reviews i. Sample Posted by KDADS: 6/30/16 ii. Upload complete by MCO: 8/31/16 iii. Review complete by KDADS: 12/1/16	Communication related to any HCBS Waiver Quality Review is sent via email to one point of contact within each MCO. This point of contact will communicate and coordinate with the applicable MCO HCBS Waiver manager. Each MCO has staff approved to utilize the QRT to provide documentation. There are 201 staff across the MCOs with this access. (Amerigroup - 131; Sunflower - 14; United - 56)	Communication related to any HCBS Waiver Quality Review is sent via email to one point of contact within each MCO. This point of contact will communicate and coordinate with the applicable MCO HCBS Waiver manager.	KDADS Survey, Certification, and Credentialing HCBS Quality Management Specialists lead by Codi Thurness, Commissioner and Janelle Lyons, Manager: Paula Ellis; Melissa Cowley; April Unruh; Nick Karam; Patte Spencer; Diane Beggs; Rick Housman; Elizabeth Allen; Neal Schmidtberger; Paula George; Rita Logan.	Quarterly sample for quality review will be pulled by the 15th day of the month following the end of the quarter. MCOs will have 60 days to upload documents to the KDADS Quarterly Review Tracking System. State quality review staff will have 90 days to complete their review and post findings in the Quality Review Tracking System.	KDADS SCC will provide remediation as needed for any systemic issues related to the Quality Review process. KDADS CSP will provide remediation as needed for any programing issues related to the specific waiver. Pleaser refer to section titled <i>Remediation and Response Process</i> in the attached draft HCBS Quality Review Policy (Appendix E, p. 2).	8 quarters starting 7/1/16 and ending 6/30/18	KDADS and KDHE will continue dialogue with CMS regarding HCBS QA processes and issues.
D-III: The state monitors service plan development in accordance with its policies and procedures.	Number and percent of waiver participants whose service plans were developed according to the processes in the approved waiver	A representative sample of HCBS Waiver individual's case files will be selected quarterly by KDADS' Financial and Information Services Commission (FISC), and assigned to the appropriate Quality Management Specialist (QMS) for review. The selected cases will include both Primary (P) and Secondary (S) listing of cases. Record cases open for 30 days or less, from MMIS eligibility date, are considered a "non-review" and will not be reviewed by QMS. A secondary case will be substituted when the case is deemed a "non-review."	HCBS Quality Review policy was reviewed and approved by KDHE with input from the MCOs (see Appendix E). It was reviewed initially in March 2016 with feedback provided by KDHE in April 2016. The policy is currently in final stages of review and formal approval. See Appendix A - TA Waiver Quality Review Project Redesign). Following the creation of these policy and procedures the Quality Review Tracking (QRT) was enhanced to align with the new procedures ensuring that all data is collected and tracked consistently for purposes of quality management.	Timeline provided to MCOs for Quality Reviews: A. 2015 Quality Reviews: i. Sample Posted by KDADS: 5/19/16 ii. Upload completed by MCO: 8/1/16 iii. Review completed by KDADS: 12/1/16 B. 2016 First Half Quality Reviews i. Sample Posted by KDADS: 6/30/16 ii. Upload complete by MCO: 8/31/16 iii. Review complete by KDADS: 12/1/16	Communication related to any HCBS Waiver Quality Review is sent via email to one point of contact within each MCO. This point of contact will communicate and coordinate with the applicable MCO HCBS Waiver manager. Each MCO has staff approved to utilize the QRT to provide documentation. There are 201 staff across the MCOs with this access. (Amerigroup - 131; Sunflower - 14; United - 56)	Communication related to any HCBS Waiver Quality Review is sent via email to one point of contact within each MCO. This point of contact will communicate and coordinate with the applicable MCO HCBS Waiver manager.	KDADS Survey, Certification, and Credentialing HCBS Quality Management Specialists lead by Codi Thurness, Commissioner and Janelle Lyons, Manager: Paula Ellis; Melissa Cowley; April Unruh; Nick Karam; Patte Spencer; Diane Beggs; Rick Housman; Elizabeth Allen; Neal Schmidtberger; Paula George; Rita Logan.	Quarterly sample for quality review will be pulled by the 15th day of the month following the end of the quarter. MCOs will have 60 days to upload documents to the KDADS Quarterly Review Tracking System. State quality review staff will have 90 days to complete their review and post findings in the Quality Review Tracking System.	KDADS SCC will provide remediation as needed for any systemic issues related to the Quality Review process. KDADS CSP will provide remediation as needed for any programing issues related to the specific waiver. Pleaser refer to section titled <i>Remediation and Response Process</i> in the attached draft HCBS Quality Review Policy (Appendix E, p. 2).	8 quarters starting 7/1/16 and ending 6/30/18	KDADS and KDHE will continue dialogue with CMS regarding HCBS QA processes and issues.
D-III: Service plans are updated/revised at least annually or when warranted by changes in waiver individual needs.	Number and percent of service plans reviewed before the waiver participant's annual redetermination date.	A representative sample of HCBS Waiver individual's case files will be selected quarterly by KDADS' Financial and Information Services Commission (FISC), and assigned to the appropriate Quality Management Specialist (QMS) for review. The selected cases will include both Primary (P) and Secondary (S) listing of cases. Record cases open for 30 days or less, from MMIS eligibility date, are considered a "non-review" and will not be reviewed by QMS. A secondary case will be substituted when the case is deemed a "non-review."	HCBS Quality Review policy was reviewed and approved by KDHE with input from the MCOs (see Appendix E). It was reviewed initially in March 2016 with feedback provided by KDHE in April 2016. The policy is currently in final stages of review and formal approval. See Appendix A - TA Waiver Quality Review Project Redesign). Following the creation of these policy and procedures the Quality Review Tracking (QRT) was enhanced to align with the new procedures ensuring that all data is collected and tracked consistently for purposes of quality management.	Timeline provided to MCOs for Quality Reviews: A. 2015 Quality Reviews: i. Sample Posted by KDADS: 5/19/16 ii. Upload completed by MCO: 8/1/16 iii. Review completed by KDADS: 12/1/16 2016 First Half Quality Reviews i. Sample Posted by KDADS: 6/30/16 ii. Upload complete by MCO: 8/31/16 iii. Review complete by KDADS: 12/1/16	Communication related to any HCBS Waiver Quality Review is sent via email to one point of contact within each MCO. This point of contact will communicate and coordinate with the applicable MCO HCBS Waiver manager. Each MCO has staff approved to utilize the QRT to provide documentation. There are 201 staff across the MCOs with this access. (Amerigroup - 131; Sunflower - 14; United - 56)	Communication related to any HCBS Waiver Quality Review is sent via email to one point of contact within each MCO. This point of contact will communicate and coordinate with the applicable MCO HCBS Waiver manager.	KDADS Survey, Certification, and Credentialing HCBS Quality Management Specialists lead by Codi Thurness, Commissioner and Janelle Lyons, Manager: Paula Ellis; Melissa Cowley; April Unruh; Nick Karam; Patte Spencer; Diane Beggs; Rick Housman; Elizabeth Allen; Neal Schmidtberger; Paula George; Rita Logan.	Quarterly sample for quality review will be pulled by the 15th day of the month following the end of the quarter. MCOs will have 60 days to upload documents to the KDADS Quarterly Review Tracking System. State quality review staff will have 90 days to complete their review and post findings in the Quality Review Tracking System.	KDADS SCC will provide remediation as needed for any systemic issues related to the Quality Review process. KDADS CSP will provide remediation as needed for any programing issues related to the specific waiver. Pleaser refer to section titled <i>Remediation and Response Process</i> in the attached draft HCBS Quality Review Policy (Appendix E, p. 2).	8 quarters starting 7/1/16 and ending 6/30/18	KDADS and KDHE will continue dialogue with CMS regarding HCBS QA processes and issues.
D-IV: Services are delivered in accordance with the service plan, including in the type, scope, amount, duration, and frequency specified in the service plan.	Number and percent of waiver participants who received services in the type, scope, amount, duration, and frequency specified in the service plan.	A representative sample of HCBS Waiver individual's case files will be selected quarterly by KDADS' Financial and Information Services Commission (FISC), and assigned to the appropriate Quality Management Specialist (QMS) for review. The selected cases will include both Primary (P) and Secondary (S) listing of cases. Record cases open for 30 days or less, from MMIS eligibility date, are considered a "non-review" and will not be reviewed by QMS. A secondary case will be substituted when the case is deemed a "non-review."	HCBS Quality Review policy was reviewed and approved by KDHE with input from the MCOs (see Appendix E). It was reviewed initially in March 2016 with feedback provided by KDHE in April 2016. The policy is currently in final stages of review and formal approval. See Appendix A - TA Waiver Quality Review Project Redesign). Following the creation of these policy and procedures the Quality Review Tracking (QRT) was enhanced to align with the new procedures ensuring that all data is collected and tracked consistently for purposes of quality management.	Timeline provided to MCOs for Quality Reviews: A. 2015 Quality Reviews: i. Sample Posted by KDADS: 5/19/16 ii. Upload completed by MCO: 8/1/16 iii. Review completed by KDADS: 12/1/16 2016 First Half Quality Reviews i. Sample Posted by KDADS: 6/30/16 ii. Upload complete by MCO: 8/31/16 iii. Review complete by KDADS: 12/1/16	Communication related to any HCBS Waiver Quality Review is sent via email to one point of contact within each MCO. This point of contact will communicate and coordinate with the applicable MCO HCBS Waiver manager. Each MCO has staff approved to utilize the QRT to provide documentation. There are 201 staff across the MCOs with this access. (Amerigroup - 131; Sunflower - 14; United - 56)	Communication related to any HCBS Waiver Quality Review is sent via email to one point of contact within each MCO. This point of contact will communicate and coordinate with the applicable MCO HCBS Waiver manager.	KDADS Survey, Certification, and Credentialing HCBS Quality Management Specialists lead by Codi Thurness, Commissioner and Janelle Lyons, Manager: Paula Ellis; Melissa Cowley; April Unruh; Nick Karam; Patte Spencer; Diane Beggs; Rick Housman; Elizabeth Allen; Neal Schmidtberger; Paula George; Rita Logan.	Quarterly sample for quality review will be pulled by the 15th day of the month following the end of the quarter. MCOs will have 60 days to upload documents to the KDADS Quarterly Review Tracking System. State quality review staff will have 90 days to complete their review and post findings in the Quality Review Tracking System.	KDADS SCC will provide remediation as needed for any systemic issues related to the Quality Review process. KDADS CSP will provide remediation as needed for any programing issues related to the specific waiver. Pleaser refer to section titled <i>Remediation and Response Process</i> in the attached draft HCBS Quality Review Policy (Appendix E, p. 2).	8 quarters starting 7/1/16 and ending 6/30/18	KDADS and KDHE will continue dialogue with CMS regarding HCBS QA processes and issues.

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	PERFORMANCE MEASURE	How sample data is derived	Item 1: description of how and when the protocols and system were implemented	Item 2: specific timelines/deadlines given to the MCOs for data collection and submission	Item 3: designated MCO staff who will collect the data	Item 4: designated MCO staff who will submit the data	Item 5: designated state staff who will review the submitted data	Item 6: specific timelines/deadlines for the state to conduct data review	Item 7: designated state staff who will conduct remediation based on the reviewed data	(Item 8): number of quarterly quality reviews that will be conducted, analyzed, and remediated prior to the TA waiver renewal	(Item 9): engage CMS staff in technical assistance discussions regarding adequate responses for analyzing data and remediation measures
D-v: Participants are afforded choice between/among waiver services and providers.	Number and percent of waiver participants whose record contains documentation indicating a choice of waiver service providers.	A representative sample of HCBS Waiver individual's case files will be selected quarterly by KDADS' Financial and Information Services Commission (FISC), and assigned to the appropriate Quality Management Specialist (QMS) for review. The selected cases will include both Primary (P) and Secondary (S) listing of cases. Record cases open for 30 days or less, from MMIS eligibility date, are considered a "non-review" and will not be reviewed by QMS. A secondary case will be substituted when the case is deemed a "non-review."	HCBS Quality Review policy was reviewed and approved by KDHE with input from the MCOs (see Appendix E). It was reviewed initially in March 2016 with feedback provided by KDHE in April 2016. The policy is currently in final stages of review and formal approval. See Appendix A - TA Waiver Quality Review Project Redesign). Following the creation of these policy and procedures the Quality Review Tracking (QRT) was enhanced to align with the new procedures ensuring that all data is collected and tracked consistently for purposes of quality management.	Timeline provided to MCOs for Quality Reviews: A. 2015 Quality Reviews: i. Sample Posted by KDADS: 5/19/16 ii. Upload completed by MCO: 8/1/16 iii. Review completed by KDADS: 12/1/16 2016 First Half Quality Reviews i. Sample Posted by KDADS: 6/30/16 ii. Upload complete by MCO: 8/31/16 iii. Review complete by KDADS: 12/1/16	Communication related to any HCBS Waiver Quality Review is sent via email to one point of contact within each MCO. This point of contact will communicate and coordinate with the applicable MCO HCBS Waiver manager. Each MCO has staff approved to utilize the QRT to provide documentation. There are 201 staff across the MCOs with this access. (Amerigroup - 131; Sunflower - 14; United - 56)	Communication related to any HCBS Waiver Quality Review is sent via email to one point of contact within each MCO. This point of contact will communicate and coordinate with the applicable MCO HCBS Waiver manager.	KDADS Survey, Certification, and Credentialing HCBS Quality Management Specialists lead by Codi Thurness, Commissioner and Janelle Lyons, Manager; Paula Ellis; Melissa Cowley; April Unruh; Nick Karam; Patte Spencer; Diane Beggs; Rick Housman; Elizabeth Allen; Neal Schmidtberger; Paula George; Rita Logan.	Quarterly sample for quality review will be pulled by the 15th day of the month following the end of the quarter. MCOs will have 60 days to upload documents to the KDADS Quarterly Review Tracking System. State quality review staff will have 90 days to complete their review and post findings in the Quality Review Tracking System.	KDADS SCC will provide remediation as needed for any systemic issues related to the Quality Review process. KDADS CSP will provide remediation as needed for any programing issues related to the specific waiver. Pleaser refer to section titled <i>Remediation and Response Process</i> in the attached draft HCBS Quality Review Policy (Appendix E, p. 2).	8 quarters starting 7/1/16 and ending 6/30/18	KDADS and KDHE will continue dialogue with CMS regarding HCBS QA processes and issues.
G-i: The state demonstrates on an ongoing basis that it identifies, addresses and seeks to prevent instances of abuse, neglect and exploitation and unexplained death.	The state demonstrates on an ongoing basis that it identifies, addresses and seeks to prevent instances of abuse, neglect and exploitation and unexplained death.	A representative sample of HCBS Waiver individual's case files will be selected quarterly by KDADS' Financial and Information Services Commission (FISC), and assigned to the appropriate Quality Management Specialist (QMS) for review. The selected cases will include both Primary (P) and Secondary (S) listing of cases. Record cases open for 30 days or less, from MMIS eligibility date, are considered a "non-review" and will not be reviewed by QMS. A secondary case will be substituted when the case is deemed a "non-review."	KDADS released the new Adverse Incident Reporting (AIR) system in August of 2016. A user manual to this system was developed and posted online. Following release KDADS program integrity staff held a series of trainings providers and are in the process of developing a webinar on how to use the system. (For deatil, see Appendix D - Adverse Incident Reporting Project.)	Please refer to Appendix - Adverse Incident Reporting System Procedural Outline 2016	Critical incidents will be captured via the AIR system. This data will be reported by providers, public, other state agencies, and MCOs.	As part of the KDHE AIR work group, this process will be developed. See Appendix D for specific deliverables, milestones, and associated timelines.	KDADS Program Integrity staff in coordination with KDHE AIR work group.	See Addendix D.	As part of the KDHE AIR work group, this process will be developed. See Appendix D for specific deliverables, milestones, and associated timelines.	Performance measures : 8 quarters starting 7/1/16 and ending 6/30/18. Review and remediation of reported critical incidents: continuous and ongoing.	December 2016: KDADS requested guidance from CMS regarding ANE reporting processes. KDADS and KDHE will request additional technical assistance from CMS as needed.
I-4: The state provides evidence that claims are coded and paid for in accordance with the reimbursement methodology specified in the approved waiver and only for services rendered.	Number and percent of provider claims that are coded and paid in accordance with the State's approved reimbursement methodology.	This measure was applicable in the Fee For Service environment, but is not applicable in a Managed Care system as the state no longer pays claims. During the evaluation of HCBS measures in 2014 with CMS and TRUVEN, this measure was failed to be omitted. Following CMS guidance, this measure will be removed with each upcoming Waiver amendment.									
I-4i: The state provides evidence that rates remain consistent with the approved rate methodology throughout the five year waiver cycle.	Number and percent of payment rates that were certified to be actuarially sound by the State's actuary and approved by CMS.	This measure is a 100% review.	KDHE provides to KDADS the data regarding related to the Waiver population that are actuarially sound	This measure does not have a responsibility of the MCO.	This measure does not have a responsibility of the MCO.	This measure does not have a responsibility of the MCO.	Data around actualy sound rates will be reviewed by KDHE and reported by KDADS.	KDHE reviews capitation rates twice annually.	KDHE is responsible for ensuring capitation rates are actuarially sound.	Twice Annually.	KDADS and KDHE will continue dialogue with CMS regarding HCBS QA processes and issues.